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Revocation/New Power of Attorney/Correspondence Address Change (Form A-9/2012)

**REVOCATION OF POWER OF ATTORNEY
WITH A NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

I hereby revoke all previous powers of attorney given in the patent(s) and/or application(s) identified herein.

[] A Power of Attorney is submitted herewith.
OR

[X] I hereby appoint the practitioners associated with the Customer Number: **000040401** for the patent(s)/application(s) identified herein.

Practitioner Under Customer Number: Abe Hershkovitz, Reg. No. 45,294

[X] Please change the correspondence address for the patent(s)/application(s) identified below to:

CORRESPONDENCE ADDRESS

[X] Customer Number: 000040401 OR [] Correspondence address below

Name	HERSHKOVITZ & ASSOCIATES, LLC				
Address					
City		State		Zip Code	
Country	Email		Telephone		Facsimile
	patent@hershkovitz.net		703-370-4800		

IDENTIFICATION OF PATENT(S)/APPLICATION(S)

[illegible]

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SIGNATURE OF INVENTOR(S) OR ASSIGNEE

I/We am/are the:

☐ Inventor(s)

☒ Assignee of entire and exclusive interest in and to the patent(s) and application(s) identified herein. See 37 CFR §3.71.

☒ Statement under 37 CFR §3.73(c):


The documentary evidence of a chain of title from the original owner(s) to the Assignee, as recorded/to be recorded in the Assignment records of the Office:

☐ is attached hereto (copy of recorded Assignment/conveyance, or copy of Assignment/conveyance being submitted concurrently for recordation);

OR

☒ was recorded 07/26/2000, at Reel/Frame 011045/0800, recorded 09/15/2005 at Reel/Frame 016536/0321, recorded 04/04/2006 at Reel/Frame 017411/0903, recorded 05/29/2008 at Reel/Frame 021006/0970, recorded 06/19/2008 at Reel/Frame 021118/0972, recorded 12/18/2008 at Reel/Frame 021998/0935, recorded 10/09/2012 at 029095/0963, recorded 10/09/2012 at Reel/Frame 029101/0124 and recorded 10/09/2012 at Reel/Frame 029098/0498 for the patent(s)/application(s) identified herein.

The Individual(s) whose signature(s) is/are supplied below is/are the Inventor(s)/authorized to act on behalf of Assignee of entire and exclusive interest in the patent(s)/application(s) identified herein.

Assignee of Entire and Exclusive Interest	FPX, LLC		
Printed Name and Title of Authorized Signatory for Assignee	Audrey Spangenberg, Manager		
Signature of Authorized Signatory for Assignee		Date	12-12-2012
Signature of Inventor		Date	
Signature of Inventor		Date	
Signature of Inventor		Date	

Any additional patent(s)/application(s), or additional signature(s) of Inventor(s), or additional Assignee(s)/Signatory(s), are submitted on attached page(s).

NUMBER OF PAGES ATTACHED: _____

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